

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)	MAIL STOP RCE
)	
Junichi Nishiyama)	Group Art Unit: 2625
)	
Application No.: 09/895,402)	Examiner: JAMES A THOMPSON
)	
Filing Date: July 2, 2001)	Confirmation No.: 9965
)	
Title: DEVICE, SYSTEM, METHOD, AND)	
PROGRAM FOR IMAGE DATA)	
HANDLING, AND DEVICE FOR)	
IMAGE PROCESSING)	

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL LETTER**

MAIL STOP RCE

Customer Number **21839**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 of the above-identified application and encloses the ☐ \$405 ☒ \$810 fee due under 37 C.F.R. § 1.17(e).

1. ☒ A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.
- ☐ B. Applicant(s) previously submitted the following documents for which continued examination is requested:
- ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.
- ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
- ☐ Other: _____
2. The following documents are enclosed with this submission:
- ☒ Amendment/Reply
- ☐ Affidavit(s)/Declaration(s)
- ☐ Information Disclosure Statement
- ☐ Petition for Extension of Time

- ☐ Other:
3. ☐ Small entity status is hereby claimed.
- ☒ No additional claim fee is required.
- ☐ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

					FEES
Examination Fee (1801)					\$ 810
	No. of Claims		Extra Claims	Rate	
Total Claims	25	25	0	x 52 (1202)	\$ 0
Independent Claims	6	6	0	x 220 (1201)	\$ 0
If multiple dependent claims are presented, add \$ 390					\$ 0
Total Fee					\$ 810
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					\$ 0
TOTAL FEE DUE					\$ 810

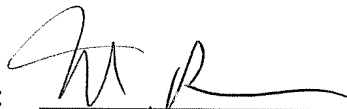
4. ☒ Charge \$ 810 to Deposit Account No. **02-4800** for the fee due.
5. ☐ A check in the amount of _____ is enclosed for the fee due.
6. ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date: January 12, 2009

By: _____



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